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APPLICANTS Mahmoud Soliman, Miami, FL ** CONTINUING DATA ***** <input type="checkbox"/> CD ***** <input checked="" type="checkbox"/> Yes This appln claims benefit of 60/301,358 06/27/2001 ** FOREIGN APPLICATIONS ***** <input type="checkbox"/> CD ***** <input checked="" type="checkbox"/> None ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 07/08/2002					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /CHAT C DO/ <input type="checkbox"/> Met after Allowance Acknowledged Examiner's Signature CD Initials		STATE OR COUNTRY FL	SHEETS DRAWINGS 4	TOTAL CLAIMS 29 <input checked="" type="checkbox"/> 4	INDEPENDENT CLAIMS 3 <input checked="" type="checkbox"/> 1
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FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		